# Missouri State Rehabilitation Council For the Blind

# Annual Report 2000

## October 1, 1999-September 30, 2000

**December 29, 2000**

# MISSOURI

State Rehabilitation Council for the Blind
P.O. Box 88, Jefferson City, Missouri 65103-0088
(573)751-4989 FAX(573) 751-4984

**Governor Roger B. Wilson**
**State Capitol Building**
**Jefferson City, Missouri 65101**

**Dear Governor Wilson:**

**Enclosed you will find the 2000 annual report produced by the State Rehabilitation Council for the Blind. As in previous years, we have continued to provide Rehabilitation Services for the Blind with information, analysis and ideas for the improvement of services to persons who are blind or visually impaired. Our review of agency policies, procedures and operations, along with the public forums we hold in conjunction with our meetings, has given consumers an important source of input into the rehabilitation process for Missourians with visual disabilities.**

**As Chairman of the Council, I want to draw special attention to the continuing, consistent and increasing number of blind men and women who have gone to work after having completed their training with RSB. The numbers demonstrate dollars well spent.**

**We hope that you find this report to be complete and informative. We stand prepared to answer any questions about this report, the operations of Rehabilitation Services for the Blind or the work of the Rehabilitation Council.**

**Sincerely,**

**Bryan Keller**
**Chairman**

# MISSOURI

State Rehabilitation Council for the Blind
P.O. Box 88, Jefferson City, Missouri 65103-0088
(573)751-4989 FAX(573) 751-4984

**December 29, 2000**

**Dr. Frederic K. Schroeder**
**Commissioner**
**Rehabilitation Services Administration**
**Washington, D.C. 20202**

**Dear Commissioner Schroeder:**

**Enclosed you will find the 2000 annual report produced by the State Rehabilitation Council for the Blind. As in previous years, we have continued to provide Rehabilitation Services for the Blind with information, analysis and ideas for the improvement of services to persons who are blind or visually impaired. Our review of agency policies, procedures and operations, along with the public forums we hold in conjunction with our meetings, has given consumers an important source of input into the rehabilitation process for Missourians with visual disabilities.**

**As Chairman of the Council, I want to draw special attention to the continuing, consistent and increasing number of blind men and women who have gone to work after having completed their training with RSB. The numbers demonstrate dollars well spent.**

**We hope that you find this report to be complete and informative. We stand prepared to answer any questions about this report, the operations of Rehabilitation Services for the Blind or the work of the Rehabilitation Council.**

**Sincerely,**

**Bryan Keller**
**Chairman**

**MISSOURI**
**STATE REHABILITATION COUNCIL FOR THE BLIND**

**CHAIRMAN - BRYAN KELLER**

**VICE-CHAIRMAN - CEIL CALLAHAN**

**SECRETARY-TREASURER - VICTORIA BRUST**

**EXECUTIVE COMMITTEE MEMBERS - JERRY ANNUNZIO AND SANDY HALVERSON**

**MEMBERS - JERRY ANNUNZIO**
**VICTORIA BRUST**
**ROSALIE CALDWELL**
**CEIL CALLAHAN**
**BILL COBB**
**RHONDA DYCUS***
**LUCILLE FIERCE**
**JOHN FORD**
**EDNA FREEMAN**
**SANDY HALVERSON**
**DR. YVONNE HOWZE**
**BRYAN KELLER**
**RICHARD KNIGHT**
**KENT KOLAGA***
**DARRELL LAUER**
**RUSSELL MCCAMPBELL**
**PAUL MIMMS***
**ROBERT MORAN**
**MARLENE MORGAN**
**JAMES PELFREY**
**RUBY POLK**

***Denotes members who left the Council during FY 2000**

**RSB DIRECTOR - SALLY HOWARD (Ex-Officio Member)**

**STAFF MEMBERS - RITA LYNCH, Clerk-Typist II**
**MICHAEL MERRICK, Executive Director**

**Table of Contents**

**List of Acronyms:** Page 1

**Examples of Employment Attained by RSB Consumers:** Page 1

**Statistical Analysis of RSB Operations:** Page 2

**State Rehabilitation Council Actions:** Page 7

**RSB Initiatives Briefed to the SRC:** Page 14

**Appendix A -Tables From the RSB Statistical Analysis:** Page 17

**Appendix B - Consumer Satisfaction Survey Results:** Page 22

## ACRONYMS USED IN THIS REPORT

**AER= Association for the Education and Rehabilitation of the Blind and Visually Impaired**
**BEP = Business Enterprise Program**
**CBLV= Center for Blindness and Low Vision**
**CSAVR = Council of State Administrators of Vocational Rehabilitation**
**DoH = Department of Health**
**DWD = Division of Workforce Development**
**DVR = Division of Vocational Rehabilitation**
**FFY = Federal Fiscal Year**
**IPE = Individualized Plan for Employment**
**MATP = Missouri Assistive Technology Project**
**MTEC = Missouri Training and Employment Council**
**RI= Rehabilitation Institute**
**RSA = Rehabilitation Services Administration**
**RSB = Rehabilitation Services for the Blind**
**RSMo = Revised Statutes of Missouri**
**SRC = State Rehabilitation Council for the Blind**

**EXAMPLES OF EMPLOYMENT ATTAINED BY RSB CONSUMERS**

**Rental Property Manager, Bed and Breakfast Proprietor, Day Care Owner/Operator, Civil Engineer, Fencing Contractor, E-Commerce Book Sales, Attorney, Licensed Practical Nurse, Rehabilitation Teacher, Retail Gift Shop Owner, Dog Breeder, Respiratory Therapist, Minister, Architectural Draftsman, Advertising Sales Representative, Travel Agent, Machinist's Assistant, Receptionist, Social Worker, Taxpayer Service Representative,**
**Equine Groomsman, Sales Manager, Computer System Programmer, Assembler, Cook, Library Assistant, Antique Shop Owner, Cafeteria Manager, Caterer, Data Entry Clerk, PBX Operator, Trailer Court Manager, Mattress Maker, Rehabilitation Engineer, Braille Transcriptionist, Elementary School Teacher, Print Shop Operator, Medical Transcriptionist**

**STATISTICAL ANALYSIS OF RSB OPERATIONS DURING FEDERAL FISCAL YEAR 2000**

**REFERRALS**

**During Federal Fiscal Year 2000, Rehabilitation Services for the Blind (RSB) opened new cases for 1062 consumers. Of this group, 547 (51.5%) were female, 515 (48.5%) were male. The minimum age represented in the group was 15, the oldest was 91. Average age of new applicants for RSB services was 46. There were 143 ethnic minorities among the applicants (13.4%), 69 male and 74 female. This nearly matches the state's minority population of 13.3%, although the Rehabilitation Services Administration (RSA) estimates that disability is more prevalent within this population at a rate of 150% when compared to the caucasian population. Out of 1062 cases, 327 (30.7%) consumers reported a secondary disability. The most often reported secondary disability was diabetes mellitus (131 consumers), followed distantly by heart conditions and other eye diseases. The geographic distribution of new cases was relatively even, with the largest number of referrals to a district office (172) going to the Kansas City-South District Office, the smallest (110) to the Southeast District Office.**

**TABLE 1.**

**Fiscal Year 2000 Referrals**

| | |
|---|---|
| **Male*** | **515 (48.5%)** |
| **Female*** | **547 (51.5%)** |
| **Caucasian**** | **919 (86.6%)** |
| **African-American**** | **137 (12.9%)** |
| **American Indian/Other**** | **6 (.56%)** |
| **Secondary Disability** | **327 (30.7%)** |
| **W/out Secondary Disability** | **735 (69.3%)** |

*** 0f 1062 new cases in FY 1999**

**** Of those with reported race**

**STATUS 26**

**DEMOGRAPHICS OF SUCCESSFUL CASES**

**RSB closed 508 cases as having successfully completed their rehabilitation during FFY 2000. 296 of these closures (58.2%) were female consumers, 212 were male (41.8%). Of these, 276 were in the targeted categories of competitive employment, self-employment or the Business Enterprise Program (BEP). An additional 19 persons were closed as successfully employed in sheltered employment. 213 consumers were closed as successfully employed by reaching their goal of becoming homemakers. Of the 276 target closures**

**(competitive, self and BEP employment), 157 (56.8%) were for male consumers, 119 (43.2%) were females. 15 females from ethnic minorities were included in targeted employment closures, as were 23 males. In all, consumers from ethnic minorities made up 13.6% of the successful target closures, exceeding the state's minority population of 13.3%, and nearly matching the demographics of new cases mentioned above. Of the 276 targeted successful closures, 103 consumers (37.3%) retained their employment from prior to entry to RSB services, however with increased earnings. 119 consumers (43.1%) successfully moved from unemployment to employment following rehabilitation services. The remaining 54 consumers (19.5%) completed RSB services with the same level of income and employment compared to their entry level. The average age of consumers successfully achieving targeted employment was 44.**

**TABLE 2**

**Successful Employment Closures FY1999 FY2000**

| | | |
|---|---|---|
| **Competitive Employment** | **174** | **212** |
| **Self-Employment** | **31** | **44** |
| **Business Enterprise Program** | **8** | **20** |
| **Sheltered Employment** | **14** | **19** |
| **Homemakers** | **246** | **213** |

**TABLE 3.**

**Demographics of All Successful Closures (Status 26) (of 508)**

| | |
|---|---|
| **Male** | **212 (41.8%)** |
| **Female** | **296 (58.2%)** |
| **Ethnic Minority** | **73 (14.3%)** |
| **Homemakers** | **213 (52.1%)** |
| **Employed (outside the home)** | **227 (47.9%)** |

**TABLE 4**

| Successful Targeted Closures* | NUMBER | PERCENTAGE |
|---|---|---|
| Male | 157 | 56.8% |
| Female | 119 | 43.2% |
| Ethnic Minority | 38 | 13.7% |
| Job Retention**inc.earnings | 103 | 37.3% |
| Job Retention w/no increase | 54 | 19.5% |
| New Employment*** | 119 | 43.1% |
| With Secondary Disability | 94 | 34% |
| W/out Secondary Disability | 182 | 66% |

* Targeted = Competitive, Self- and BEP Employment closures

** Job Retention = Closure where the work status was same at application as at closure

***New Employment = Closure where the work status has changed from application (i.e., from unemployed to self-employed)

SECONDARY DISABILITIES

Of the 508 successful closures, persons with identified secondary disabilities compared favorably with those for whom blindness was the sole disability. 251 persons (49.4%) who experienced secondary disabilities achieved successful employment. This exceeds the percentage of the incoming service population (new cases), in which 30.7% had a disability in addition to blindness.

TABLE 5

Successful Cases with Secondary Disabilities

| | | |
|---|---|---|
| Successful Cases | 508 | |
| With Secondary Disability | 251 | 49.4% |
| With No Secondary Disability | 257 | 50.6% |
| Prevalence of Second- ary Disability in Referral Population | 327 | 30.7% |

**COST**

**In achieving the employment successes of the 276 consumers who are employed outside the home, RSB spent a total of $3,145,380. This averages to an expenditure of $11,396 per case for targeted employment closures. The highest amount spent on a case was $79,696; the smallest amount was $140. Rehabilitation funds were used equitably, as evidenced by the average spending per case on the following categories:**

**Male: $10,436**
**Female: $12,663**
**Minorities: $11,658**

**Finally, the 213 consumers who were closed successfully as Homemakers were assisted at a total cost of $424,267. The average expenditure on this type of case was $2,001.**

**TABLE 6**

**Average Cost of Targeted Closures:**

| Total Cost | Average: (of 276) | Average Male | Average Female | Average Minority |
|---|---|---|---|---|
| $3,145,380 | $11,396 | $10,436 | $12,663 | $11,658 |

**OUTCOMES**

**The 276 targeted employment closures achieved by RSB consumers during FFY 2000 earned approximately $108,126 on a weekly basis (at time of closure). On an annual basis, this group would earn $5,622,552. If a tax rate of 20% existed, this group of consumers would repay the cost of their rehabilitation ($3,145,380) in just under three years. This example of rehabilitation paying for itself does not consider the even greater cost savings that result from the decrease in the cost of benefits such as Social Security, Temporary Assistance for Needy Families, etc. 62 consumers who received Social Security Disability payments are anticipated to meet the Substantial Gainful Activity standard of $1,270 monthly for blind consumers or $900 monthly for consumers with other disabilities. 119 of the targeted closures were made by female consumers; 157 by males. This varies somewhat from their respective percentages in the referral population. The distribution of income appears to be equitable, as determined by comparing income at closure to race and gender in the following table:**

**Average Weekly Income by Category**

**Male: $414**
**Female: $364**
**Ethnic Minority: $394**
**Overall: $393**

**In those cases in which consumers retained employment from prior to entry to RSB services, the average income (weekly) increased from $383 to $453, an improvement of 18.2%.**

**TABLE 6**
**Income Comparison from Targeted Closures**

| | |
|---|---|
| **Total Weekly Salary (276 cases)** | **$108,126** |
| **Average Weekly Salary** | **$393** |
| **Male:** | **$414** |
| **Female:** | **$364** |
| **Minority:** | **$394** |
| **New Employment:** | **$291** |
| **Retention:** | **$453** |
| **Increased Weekly Salary Average in Retention Cases:** | **$70** |

**POST-EMPLOYMENT SERVICES**

**Of the 276 targeted employment cases closed during FFY 2000, 142 were opened in status 32 (Post-Employment Services) at some time during the year. This category increased considerably from FFY 1999, during which 37 cases were reopened for services following successful closure. Of the 142 post-employment cases opened, 57 were subsequently closed as having successfully**

**retained employment, 9 were closed to be re-opened as new cases where the employment could not be maintained or the situation called for a revision of the Individualized Plan for Employment (IPE) and 76 remain open at the time of this report.**

**CASES CLOSED AS UNSUCCESSFUL**

**In total, RSB closed 367 cases as unsuccessful. These fall into three categories: 08 (closed from application status prior to IPE development), 28 (closed after IPE services have been provided), and 30 (closed after IPE development but before services have been delivered). This compares to FFY 1999, when 555 cases were closed in these categories.**

**STATUS 08**

**138 cases were closed in status 08 compared to 216 in FFY 1999. These include applicants who were found ineligible for RSB services. Of this number, the reasons for closure are as follows:**

| | |
|---|---|
| **Unable to Locate or Contact; or moved:** | **10** |
| **Refused services or further services:** | **22** |
| **Transferred to another agency:** | **9** |
| **Failure to cooperate:** | **9** |
| **No disabling condition:** | **83** |
| **All other reasons:** | **5** |

**66 males and 72 females were closed in status 08, very closely matching the ratio of males to females among the population of new cases in FFY 2000. Minorities are over-represented in cases closed in status 08, making up a total of 20.2% (28) of the closures.**

**TABLE 7**

**Cases Closed in Status 08***

| | |
|---|---|
| **Male** | **66 (47.8%)** |
| **Female** | **72 (52.2%)** |
| **Ethnic Minority** | **28 (20.2%)** |

***Closed following application but before Individualized Plan for Employment completed**

**STATUS 28**

**184 consumers' cases were closed in status 28, comparing favorably with FFY 1999 when 223 consumers were closed in this category. These cases represent consumers who have completed an IPE and been provided services, then were closed as unsuccessful. The reasons for closure provided for this group are as follows:**

| | |
|---|---|
| **Unable to Locate or Contact; or moved:** | **62** |
| **Refused services or further services:** | **71** |
| **Death:** | **17** |
| **Client institutionalized:** | **4** |
| **Failure to cooperate:** | **21** |
| **All other reasons:** | **9** |

**93 males and 91 females were closed in status 28. Minorities are over-represented in status 28 when compared to either the referral or successful groups (26% as compared to 13.4% in the referral group, 13.6% in the successful closures). Further examination yielded the following cost breakdown:**

**Average Expenditure on Status 28 Cases**

| | |
|---|---|
| **Overall:** | **$9,795** |
| **Male:** | **$9,967** |
| **Female:** | **$9,619** |
| **Minority Male:** | **$3,967** |
| **Minority Female:** | **$6,716** |

**As shown in the expenditure comparisons above, there is a noticeable disparity between the expenditures for minorities and those of the overall caseload. There should be further investigation of the reasons for the over-representation of minorities in unsuccessful closures after services have been provided.**

**The area which is perhaps of the greatest concern is cost. In total, $1,802,379 has been expended over the life of the cases closed in status 28, averaging $9,795 per case. Of particular concern is the fact that 62 of these cases (33.6%) have been closed as "Unable to locate or contact or moved" and 71 (38.5%) as "Refused services or further services" after RSB has expended considerable funds in their rehabilitation. Further examination of the factors involved in these closures is needed to ensure that RSB has done everything possible to keep consumers involved in their rehabilitation plan once services have begun.**

**TABLE 8**

**Cases Closed in Status 28***

| | |
|---|---|
| **Male** | **93 (50%)** |
| **Female** | **91 (50%)** |
| **Ethnic Minority** | **48 (26%)** |
| **Total Expenditure** | **$1,809,828** |
| **Average Expenditure- Overall** | **$9,795** |
| **Average Expenditure- Male** | **$9,967** |
| **Average Expenditure- Female** | **$9,619** |
| **Average Expenditure- Minority Male** | **$3,967** |
| **Average Expenditure- Minority Female** | **$6,716** |

***Closed as unsuccessful following service delivery**

**STATUS 30**

**45 cases were closed in status 30 (after having done an IPE, but before beginning services), compared to 116 during FFY 1999. In all, 31 male and 14 female consumers' cases were closed, with males over-represented (68.8% vs. 48.5% of the referral group). Reasons given for closure of these cases include:**

| | |
|---|---|
| **Unable to locate or contact; or moved:** | **12** |
| **Refused services or further services:** | **21** |
| **Death:** | **4** |
| **Failure to cooperate:** | **6** |
| **All other reasons:** | **4** |

**TABLE 9**

**Cases Closed in Status 30***

| | |
|---|---|
| **Male** | **31 (68.8%)** |
| **Female** | **14 (31.2%)** |
| **Minority** | **10 (22.2%)** |

***Cases closed following Individualized Plan for Employment development but prior to service delivery**

**TABLE 10**

**Reasons Given for Closures Other than Successful**

| REASON | Status 08 | Status 28 | Status 30 |
|---|---|---|---|
| **Unable to locate/moved** | **10** | **62** | **12** |
| **Refused services** | **22** | **71** | **21** |
| **Transferred to another agency** | **9** | | |
| **Failure to cooperate** | **9** | **21** | **6** |
| **No disabling condition** | **83** | | |
| **Death** | | **17** | **4** |
| **Client institutionalized** | | **4** | |
| **All other reasons** | **5** | **9** | **4** |

**STATE REHABILITATION COUNCIL (SRC) ACTIONS IN REVIEWING AND ADVISING ON RSB ACTIVITIES**

**MEDIATION**

**RSB informed the Council that they have been working with the Division of Vocational Rehabilitation (DVR) to establish the mediation component of the appeal process as required by the 1998 Amendments to the Rehabilitation Act. Three mediators have been jointly selected by DVR and RSB. All three selected do have extensive training in mediation, more than the minimum level required. They also have experience in conducting mediations; however, they have very little experience in working with persons who are blind. Training on the Rehabilitation Act was provided to the mediators prior to their undertaking mediations for Vocational Rehabilitation.**

**RSB and DVR jointly worked on developing procedures for mediators. One of the procedures adopted was that when mediation has been requested, a list of mediators is provided to the consumer to aid in their selection. A copy of the mediators' resumes will also be provided to allow consumers to make an informed choice based on the mediators' qualifications and background.**

**MATTERS RELATED TO FAIR HEARINGS:**

**Hearing Reviews: RSB brought the issue of fair hearing reviews to the Council. A change in the 1998 Amendments to the Rehabilitation Act required that a determination be made regarding what office could review hearing decisions. Of the three options, (1) the Governor's Office, (2) the designated state agency (Division of**

**Family Services), or (3) no review at all, the Council recommended that RSB ask the Governor's Office to review these decisions. The response from the Governor's Office was that it did not want to do hearing decision reviews. After discussion and a failed motion that the Council recommend that the decisions be reviewed by the designated state agency, the Council recommended that there be no review of hearing decisions.**

**Fair Hearing Officers: During a discussion of fair hearing policies, the Council agreed that more Fair Hearing Officers are needed. A suggestion was made to place an announcement in the *Blind Missourian* and the *Chronicle* regarding the need for more Fair Hearing Officers. Following this action, three additional Fair Hearing Officers were approved by the Council.**

**Fair Hearing Policy: Following discussion of the provision of resume information on contracted mediators, a question was raised by the Council as to whether a consumer who requests a fair hearing receives background information about the hearing officers. The response was that consumers are sent the list of hearing officers and they are welcome to call RSB regarding any questions. Upon recommendation from the Council, RSB amended the Fair Hearing Policy so that a resume or information about fair hearing officers will be sent along with the list of names to consumers requesting a hearing.**

## STUDENT CONNECTIONS

**RSB has conducted an annual seminar for blind and visually impaired consumers for approximately 9 years, with the exception of the past two years. No seminar was held during those years due to a lack of response on the part of the consumers contacted. As a**

**result of the failure of this event to attract sufficient student interest, RSB was considering not conducting a student seminar in the future. RSB conducted a survey of all student consumers during FY 1999. Of the 35 responses received. 34 indicated that they wanted the student seminar to continue.**

**Following discussion by the Council, including a failed motion to halt the student seminars, the recommendation was made that RSB continue the seminars based on an agency-run program, due to dissension between the consumer groups previously included in the planning and conduct of the seminars.**

**RSB created a committee of recent college students from agency staff members to advise on the agenda for the newly-named "Student Connections." Emphasis for the first Student Connections was placed on skills and knowledge necessary to be a successful college student. 35 students attended the first new seminar, held July 28-30 in St. Peters. Students were able to choose from 12 different presentations pertaining to blind college students, and had the opportunity to share their experiences in post-secondary education. There were many positive comments from those who attended. Next year's Student Connections will be scheduled at the same hotel and at approximately the same time of year.**

## COOPERATION WITH WORKFORCE INVESTMENT SYSTEM

**RSB reported that their Assistive Technology Specialist is working with the Missouri Assistive Technology Project (MATP) to assist One-Stop Centers in becoming accessible to blind consumers. The specialist reported that, after visiting approximately half of the centers, some of the issues being addressed**

**are public transportation, literature in alternate formats, and adaptive technology. A comprehensive list of assistive technology equipment was developed jointly by RSB and MATP that would make a center accessible to blind persons. This list, as well as an electronic resource directory developed by the MATP, was provided to all One-Stops and the One-Stop Executive Committee.**

**The accessibility recommendations presented to the One-Stop Executive Committee were not approved; however, the committee did recommend that some pilot projects be tried to find out what accessible equipment might work best for blind consumers. The Council voted to go on record as expecting that all One-Stops should be expected to be in compliance with the Americans with Disabilities Act. The Governmental Affairs committee was charged with developing a position statement regarding standards to be met by the One-Stop Centers.**

**A position paper was written and sent to the Division of Workforce Development (DWD) and the Missouri Training and Employment Council (MTEC) recommending that all One-Stops should be equipped with adaptive technology for use by blind consumers. The MTEC council met in February and voted to approve the adaptive equipment list for the One-Stops, with implementation expected no later than July 1, 2001.**

**A group from the State Rehabilitation Council met with staff from DWD to discuss lack of accessibility for blind persons at the centers. The meeting was positive and plans are being made to meet the July 2001 deadline to make the centers accessible. Training for One Stop staff members in disability awareness and technology is also being planned.**
**JOBLINE**

**RSB informed the Council that the agency had been approached about the possibility of purchasing Jobline, a telephonically operated version of America's Job Bank. Already in use in several other states, Jobline allows blind consumers to access information about job openings through the telephone, greatly improving their ability to compete for employment with the most current information possible. Following a demonstration of Jobline, the Council voted to recommend that RSB should request funding to pay for 50% of the licensing cost of the program for use in Missouri.**

**RSB SMALL BUSINESS POLICY**

**In mid-September, 1999, RSB implemented a new policy directive relating to establishment of small businesses for Vocational Rehabilitation (VR) consumers at the suggestion of a Hearing Officer. It was pointed out at the November SRC meeting that the Council Policy/Program Committee had not been consulted for input before this change was made. The Council recommended at that meeting that RSB should suspend the policy directive until the Committee has an opportunity to review and comment on it. RSB did suspend the policy directive, and met with the Policy/Program Committee to discuss their concerns.**

**The Committee Chairperson reported that the Committee expressed concern about what they believed were restrictions in the policy regarding new and existing business. The Committee recommended that RSB rewrite the policy to further clarify this issue and offered the Committee's assistance in the process.**

**The Committee met with RSB staff during the next scheduled meeting and discussed the proposed small business policy directives.**

**Concerns were raised regarding the use of a review team to approve small business expenditures, the definition of new versus existing business, and a perceived cap on expenditures. The Committee recommended that the language be changed to emphasize what consumers can do instead of what cannot be done under the policy. RSB staff made the changes requested by the Committee, and the Council voted to recommend approval of the amended policy directive.**

**PREVENTION OF BLINDNESS**

**Missouri's Legislature passed SB721, a bill primarily related to assistive technology, but with provisions relating to the establishment of a program devoted to prevention of and education about blindness. According to SB721, these efforts will be funded through donations made by Missourians when they renew licenses, with the funds being allocated to the Department of Health (DoH). RSB's director informed the Council that she would be working with the Department of Health about implementation of this program, as the DoH has no prevention of blindness program, while RSB has had prevention of blindness as part of its' mission since 1915.**

**After this meeting, the director reported that DoH has indicated to her that it would like to transfer the responsibility for the program of blindness education and prevention that was created with the passage of SB721 during the past legislative session to RSB. However, at the meeting it was reported that the Missouri Optometric Association has expressed some concern about this transfer. The Council recommended that RSB take whatever actions necessary to affect the transfer of this program to RSB, and wrote a letter to DoH indicating support of this action in a way that**

**is mutually agreeable and beneficial to the program. Copies of the Council's correspondence were forwarded to sponsors of the legislation.**

## RSB'S INDIVIDUALIZED PLAN FOR EMPLOYMENT

**After reviewing RSB's proposed IPE developed under the 1998 Amendments to the Rehabilitation Act, the Program/Policy Committee reported concerns that the IPE was not specific enough regarding appeal rights and options for completion. The SRC recommended that RSB draft an addendum to add to the IPE document. The revised IPE was presented to the SRC, and they recommended its' approval and use by RSB.**

## BLINDNESS REGISTRY

**In response to concerns about the inability to clearly quantify RSB's service population, and in order to more accurately perform the comprehensive, statewide assessments of rehabilitation needs, the SRC asked for information pertaining to the statutory authority (RSMo 209.010) of RSB to maintain a register of blind persons throughout the state. The SRC Executive Director attempted to gather information from various sources, including other states, regarding creating a blindness register.**

**The Evaluation Committee reviewed the information collected on blindness registries and recommended that the Council urge the agency to take steps to establish a blindness registry for Missouri. The Council recommended this action to RSB unanimously.**

## PROPOSED REGULATION ON SHELTERED/EXTENDED EMPLOYMENT

**SRC members were provided with copies of the proposed RSA regulation that revised the definition of "employment closure." Following an explanation to the group that, according to the proposed regulations, sheltered or extended employment would no longer be considered as an employment closure, it was noted that RSB does very few sheltered employment closures. RSB consumers would still be able to work in sheltered or extended employment as part of their IPE to work toward competitive employment, but their cases would not be closed as "successful" as long as they remained in this type of employment. No action was taken by the Council regarding the proposed regulations.**

## MAXI AIDS

**It was reported to the SRC that on April 27th, 2000, RSA rescinded its previous policy directive which encouraged VR agencies not to purchase aids and appliances for consumers from Maxi Aids because of illegal business practices. RSB had previously brought the issue of purchasing from Maxi Aids to the SRC and received a recommendation that they purchase from Maxi Aids only if the item was not available from any other vendor. Upon notification of the rescission of the RSA policy directive, 11 out of the 19 RSB rehabilitation teachers have requested that they again be permitted to use Maxi Aids as a vendor on a regular basis. The Council recommended that RSB resume normal purchasing from Maxi Aids, but to keep careful watch on its' business practices.**

## IPE POLICY FOR REHABILITATION TEACHERS

**The SRC asked RSB for clarification about a policy regarding who was permitted to sign the IPE for VR homemakers. A new policy**

**was enacted in June, 2000, by RSB to the effect that the IPE for VR homemakers must be signed by a VR counselor if the rehabilitation teacher does not have a Master's Degree in the required fields or certification as a rehabilitation counselor. The concern expressed by the Council was that experienced rehabilitation teachers would feel slighted at the need to obtain approval from a staff member not familiar with rehabilitation teaching. RSB stated that a memo was received from the Council of State Administrators of Vocational Rehabilitation (CSAVR) which indicated that rehabilitation teachers or district supervisors who meet the counselor standard of "qualified personnel" could also sign off on the IPE; however, as homemakers are VR cases, the requirement for "qualified personnel" exists. The Council was reassured by RSB's explanation of the policy, and opted not to take any action regarding it.**

## CONSUMER SATISFACTION SURVEYS

**For the first time in FY 1999, RSB contracted with the University of Missouri-Columbia Rehabilitation Counseling Program to conduct the consumer satisfaction survey on behalf of the SRC. The results of the survey were not received until August, 2000, well beyond the projected dates for accomplishment. Due to changes in personnel in the UMC program, RSB will no longer be contracting with the University of Missouri to do the survey. Information from the FFY 1999 VR Consumer Satisfaction Survey is included at Appendix B.**

## RSB INITIATIVES BRIEFED TO THE SRC

## BUSINESS ENTERPRISE PROGRAM

**RSB reported that only two vendors bid on the manager/trainer position at the Capitol Building cafeteria, and the selection to fill this position took place in November. It was explained that this facility will become the BEP training center under a plan submitted to the Office of Administration and approved by the Missouri Legislature earlier in 1999. The first trainees to utilize this training concept began classroom training on November 2nd, 1999, and were projected to start on-the-job training at the Capitol Cafeteria in mid-December.**

**The Capitol Building Cafeteria opened on February 7th as a full-scale cafeteria. The manager is a former BEP blind vendor, although he is now an employee of Lions' Business Opportunities for Missouri Blind.**

**It was also reported that the Fort Leonard Wood food service contract has been awarded to BEP, and that a blind vendor has been selected by the BEP Executive Committee as the contractor for this new BEP operation.**

**A question had been raised previously to the SRC regarding the provision of BEP training in the St. Louis area. RSB's director reported that all applicants interested in and eligible for this training from the St. Louis area have been able to come to Jefferson City for the training. Rehabilitation counselors have been asked to let her and the BEP supervisor know of any consumers identified who are interested in this training but who cannot train in Jefferson City.**

## RSB'S DATABASE INITIATIVES

**RSB reported that they have formed an Employer Database Committee to develop a database to be used by counselors and job development specialists to better prepare consumers for employment in various regions around the state. This database is to be the basis for a system to electronically manage paperwork flow, accounting and information analysis. As this would call for the use of electronic forms by staff, the Council recommended to RSB that it seriously consider looking into Future Forms, a firm that creates electronic forms that are accessible for blind staff by speech, and that work with a database to allow information to be recorded, accessed and analyzed.**

**RSB reported that they were working on the purchase of Future Forms. A representative from Future Forms did a demonstration of their program for RSB. It was requested that these forms be designed to be used with a data base and as data entry forms. The Database Committee developed a list of the various characteristics of consumers that RSB needs to track through a database, and a search is being done to find a software program that will manage the data. Additionally, RSB is working on a system to link all district offices and the state office electronically.**

## MENTORING PROGRAM

**RSB reported that the Mentoring Committee has met with all of the district offices. The Committee has made several recommendations which are being implemented, increasing the efficacy of the program which aims to match individuals who have recently experienced blindness with successful blind consumers. Each district office has appointed a representative to serve as a mentoring**

**liaison. These liaisons and the Committee will be meeting to help improve the process of identifying, training, and assigning mentors to VR consumers.**

## CENTER FOR BLINDNESS AND LOW VISION

**RSB informed the Council that the Rehabilitation Institute (RI) will discontinue operation of the Center for Blindness and Low Vision (CBLV) in Kansas City. This issue is important as RSB has contacted a host of potential contractors to provide personal and vocational adjustment to blindness services in the state of Missouri, and CBLV is the only in-state source for this service. Alphapoint, a National Industries for the Blind facility in Kansas City, was the only contractor interested in providing these services upon their discontinuation by RI. Alphapoint will run CBLV and provide the same services currently provided by the facility, using the same staff; however, with more emphasis on vocational or job-oriented training, but without residential facility services at this time. Alphapoint is planning to relocate to the southeast part of Kansas City in a new facility, and they hope to open in late 2001, with CBLV becoming part of that facility.**

## QUALIFIED PERSONNEL STANDARD FOR REHABILITATION TEACHERS

**RSB's director reported that she has obtained a legal opinion that the Rehabilitation Act standards for "Qualified Personnel" would apply to rehabilitation teachers as well as counselors. She noted that there are no state standards for rehabilitation teachers, but there are currently national standards for certification overseen by the Association for the Education and Rehabilitation of the Blind and**

**Visually Impaired (AER). These standards are being changed as AER will no longer be a certifying organization. A new organization called "The Academy" will be taking over certification from AER, and came out with their requirements for certification in September, 2000. RSB plans to make changes to their entry-level requirements in keeping with these new standards when they are announced. It is hoped that RSB can create a new classification of rehabilitation teacher: Senior Rehabilitation Teacher, which would be required to meet the new standards.**

## STANDARDS AND INDICATORS

**RSB's director reviewed with the Council the final Standards and Indicators from the Rehabilitation Act regulations. She said that in evaluating RSB's performance according to FY98 data, RSB came out well. The two evaluation standards are for employment and for underserved populations. The six indicators under the employment standard were discussed. Regarding the evaluation standard of service rate to minorities with disabilities, RSB came out at 82%.**

**Appendix B:**
**Consumer Satisfaction Survey Results, FFY 1999**

**Executive Summary of the FY 1999 Consumer Satisfaction Survey**

**Dr. John Kosciulek, UMC Rehab Counseling Program**

**Data sources for Consumer Sat. Survey:**

**812 total case closures**
**82 survey packets returned undeliverable**
**730 total survey packets mailed to consumers**
**269 surveys returned: 46 surveys returned with no or minimal data were not included in the "n"**
**223 usable consumer sat. surveys returned (31% response rate)**
**165 consumers expressed interest in participating in a telephone interview (23% response rate)**
**131 total telephone interviews were able to be completed (79% of those who expressed interest)**

**The data, results, summaries and recommendations that follow in this report are thus based on the following data:**

**223 respondents**
**131 completed phone interviews**
**507 non-respondents**

**Levels of consumer satisfaction as per 14 Items on the Survey:**
**Note: Lower item mean scores indicate higher levels of satisfaction and higher item mean scores indicate lower levels of consumer satisfaction.**

**1. The choices of services available from RSB were sufficient to meet my needs.**
**Mean Satisfaction: 1.76**
**Number of respondents: 211**

**2. I had the final say in the selection of a vocational goal.**
**Mean Satisfaction: 1.85**
**Number of respondents: 192**

**3. I had the final say in the selection of service providers.**
**Mean Satisfaction: 1.91**
**Number of respondents: 202**

**4. My rehabilitation plan was individualized to meet my goals.**
**Mean Satisfaction: 1.66**
**Number of respondents: 199**

**5. I received services from RSB without excessive waiting.**
**Mean Satisfaction: 1.83**
**Number of respondents: 213**

**6. RSB staff returned my phone calls promptly.**
**Mean Satisfaction: 1.75**
**Number of respondents: 199**

**7. RSB staff were knowledgeable about my needs as a person who is blind.**
**Mean Satisfaction: 1.73**
**Number of respondents: 194**

**8. RSB staff helped me build my confidence in my abilities.**
**Mean Satisfaction: 1.95**
**Number of respondents: 194**

**9. The services RSB provided were adequate to help me secure employment.**
**Mean Satisfaction: 2.26**
**Number of respondents: 188**

**10. RSB staff gave me the help I needed to find employment.**
**Mean Satisfaction: 2.25**
**Number of respondents: 190**

**11. Upon completion of my vocational rehabilitation plan, I was prepared to seek employment.**
**Mean Satisfaction: 2.21**
**Number of respondents: 188**

**12. As a result of the services provided by RSB, my present work situation is better than it was before I began the program.**
**Mean Satisfaction: 2.23**
**Number of respondents: 187**

**13. The support I received from RSB following my employment was adequate to ensure continued success**
**Mean Satisfaction: 2.27**
**Number of respondents: 187**

**14. I am pleased with the overall outcome of my experience in the vocational rehabilitation program provided by RSB.**
**Mean Satisfaction: 1.98**
**Number of respondents: 215**

***Highest levels of satisfaction reported for items 1,4,5,6 and 7 (general case service processes) (mean = 1.74)**

***Moderate levels of satisfaction reported for items 2, 3, 8, and 14 (counseling and outcomes) (mean = 1.92)**

***Lowest levels of satisfaction reported for items 9, 10, 11, 12 and 13 (employment and vocational rehabilitation services) (mean = 2.24)**

**Consumers reported higher levels of satisfaction with general case service processes and outcomes (1, 2, 3, 4, 5, 6, 7, 8, 14) [mean= 1.83] than with specific employment related processes and outcomes (9, 10, 11, 12, 13) [mean 2.24].**

**The overall mean of all 14 survey items, which is reported and used in the analysis in this Final Report as a "Total Consumer Satisfaction Score," was found to be 1.97.**

**Data on the 14 item survey as a "consumer satisfaction instrument" indicated a high internal consistency reliability (alpha = .96). This finding indicates that the 14 item survey is a reliable measure of the construct of "consumer satisfaction with rehabilitation services."**

**Demographics of Respondents:**

**Of the respondents:**
***56 were male, (25%) and 167 were female (75%).**
***213 were white (95%), 9 were black (4%), and 1 was Asian (<1%)**
***79 were married (35%), 82 were widowed (37%), 14 were divorced (6%) and 48 were never married (22%)**
***170 were 26 closures, 32 were status 28 closures and 18 were status 30 closures**

**Age: n = 223 Mean = 59.25 Range = 16-87**
**Education: n = 223 Mean = 12.14 Range = 3-20**
**# of months from eligibility to closure: n = 223 Mean = 18.27**
**Range = 1-90**
**Weekly Earnings: n = 197 Mean = $132.97 Range = $0- 840**
**Monthly Public Assistance: n = 188 Mean = $68.86**
**Range = $0-1045**

**Section 5**

**Comparison of Demographic Characteristics of Respondents and Non-Respondents**

**Table 5 below provides descriptive data comparing respondents and non-respondents. A t-test was used to evaluate differences between respondents and non-respondents on age, education, (number of years) number of months from eligibility to closure, weekly earnings and amount of public assistance received. Results indicated that there were significant differences between the means of the respondents and the non-respondents on the following variables: age, months from eligibility to closure, weekly earnings and public assistance amount.**

**More specifically, results indicated that on average:**

**a) Respondents were older than non-respondents (59 y/o vs. 49)**

**b) The number of months from eligibility to closure was less for respondents (18 months vs. 30 months)**

**c) Weekly earnings for respondents were higher ($132 per week vs. $45)**

**d) Respondents were receiving less public assistance ($68 vs. $113)**

**NOTE: Only education was not significantly different:**
**Respondents: 12.14 vs. 11.16 for non-respondents**

**Section 6:**
**Comparison of Levels of Consumer Satisfaction Among Status 26, 28 and 30 Closures**

**As per Table 6 below, results on comparing the level of satisfaction among status 26, 28 and 30 closures indicated that status 26 consumers were significantly more satisfied than consumers closed in statuses 28 and 30.**

**No difference existed between 28 and 30.**

**A review of the mean scores indicated that consumers with 26 closures reported the highest level of satisfaction, followed by 28 closures and then 30 closures.**

**Section 7**
**Comparison of Respondents who were VR cases to Respondents who were Homemaker Cases:**

**Table 7 below provides a comparison of the means of the level of consumer satisfaction on each of 14 survey items and the Total Consumer Satisfaction score between respondents who were employment (RC) and respondents who were homemaker cases (RT).**

**As per the data in Table 7, there were minimal differences between the two groups. The groups differed on only two of the 14 survey**

**items ( 1 = the choice of services available was sufficient to meet my needs and 7 = RSB staff were knowledgeable about my needs as a person who is blind). Table 7:**

| **Question:** | **RC** | **RT** |
|---|---|---|
| 1. | 1.90 | 1.57 |
| 2. | 1.90 | 1.78 |
| 3. | 1.80 | 2.05 |
| 4. | 1.69 | 1.61 |
| 5. | 1.89 | 1.76 |
| 6. | 1.71 | 1.80 |
| 7. | 1.83 | 1.60 |
| 8. | 1.99 | 1.89 |
| 9. | 2.29 | 2.20 |
| 10. | 2.23 | 2.28 |
| 11. | 2.29 | 2.11 |
| 12. | 2.16 | 2.33 |
| 13. | 2.18 | 2.16 |
| 14. | 2.04 | 1.89 |
| Total: | 1.98 | 1.94 |

Section 8: Comparison of Respondents who were Competitive vs. Homemaker Closures:

Table 8 below provides a comparison of the means of the levle of consumer satisfaction between respondents who were competitive closures vs. those who were homemakers.

As per the data in table 8, results indicated that there were minimal differences between the two groups: They significantly differed on only 2 questions: (10: RSB staff gave me the help I needed to find employment and 12: As a result of the services provided by RSB my present work situation is better).

Table 8:

| Question: | Comp. | Homemaker |
|---|---|---|
| 1. | 1.72 | 1.57 |
| 2. | 1.72 | 1.78 |
| 3. | 1.62 | 2.05 |
| 4. | 1.48 | 1.61 |
| 5. | 1.54 | 1.76 |
| 6. | 1.51 | 1.80 |
| 7. | 1.62 | 1.60 |
| 8. | 1.67 | 1.89 |

| | | |
|---|---|---|
| 9. | 2.13 | 2.20 |
| 10. | 1.87 | 2.28 |
| 11. | 2.23 | 2.11 |
| 12. | 1.92 | 2.33 |
| 13. | 2.10 | 2.16 |
| 14. | 1.85 | 1.89 |
| Total: | 1.78 | 1.94 |

Section 9: Comparison of Satisfaction Level of Respondents By Geographic Region:

First data in this section is a table indicating each geographic region, the number of respondents from each region, and the mean consumer satisfaction score of the respondents from that region.

It is important to note once again that a lower mean score indicates a higher level of consumer satisfaction.

| Geographic Region | Number of Respondents | Consumer Satisfaction Score |
|---|---|---|
| Kansas City | 24 | 2.32 |
| Mid-Missouri | 69 | 1.79 |
| St. Louis-North | 13 | 2.56 |
| Southeast | 25 | 1.39 |
| Southwest | 24 | 1.66 |
| St. Louis-South | 68 | 2.12 |

Telephone Interview Data Summary of Responses

131 Telephone Interviews Conducted

The summary below highlights the themes, patterns and content of respondent experiences, services and recommendations for the rehabilitation processes provided by RSB. Telephone interviews ranged from approximately 5 minutes to 15 minutes in length.

1. In general, how would you describe your experience of receiving rehabilitation services from RSB?

Respondents generally reported that their experience of receiving services from RSB was very positive. Major themes that emerge from the interviews indicated that RSB counselors were "very helpful," "very good" and thorough."

Concerns expressed by respondents related to their overall experience with RSB include the following major patterns: a very slow process, especially at the beginning (e.g. eligibility), erratic response patterns (returning phone calls) and not addressing individual consumer needs and interests.

Respondents also indicated that they felt it took an extended period of time for them to understand what RSB could offer and how they could benefit from services and funding. Several respondents indicated they were confused about the eligibility process. Respondents suggested that a more extensive and thorough up-front orientation about RSB would have been helpful. In response to this question, respondents also commented that RSB/their counselor lacked the expertise and financial resources to assist them with work-related needs.

The majority of responses to this question appeared to indicate that respondents had positive experiences with RSB and that consumers needed additional assistance with job-seeking related activities.

2. What specific services most helped you to achieve your employment/homemaker goals?

In response to the above question, responses provided a large amount of information/data related to specific service processes and techniques that helped them in achieving their goals. The most significant pattern in the data was the listing of specific accommodation devices that assisted consumers with more independent home and/or work functioning.

The list of specific orientation and mobility services and aids is extensive and varied. This list, which includes closed-captioned television monitors, talking books, mobility training, large print and Braille materials and career training, indicates that RSB consumers are a diverse group of individuals that require differing types of services and accommodation devices. As such, RSB counselors must be aware of the diversity of needs

presented by consumers and the community resources necessary to meet those needs.
Respondents also indicated that efficient communication methods helped keep them "motivated" toward achieving their goals. Several respondents stated that the continuous flow of mailed information and telephone calls from their counselor encouraged them to continue to work toward home and/or work independence. Respondents also commented that their individual counselors were helpful in assisting them with personal, career and independent living exploration and kept them motivated toward decision-making and goal-attainment. Respondents appeared to be stating that the individual professional and personal characteristics of their counselors were an important factor in their rehabilitation process.

3. What recommendations do you have for improving the service process provided by RSB?

Respondents provided a variety of general case processes and specific, individual-related ideas for improving the RSB process. One pattern that emerged was that many of the respondents reported that the service process they went through was adequate and that no major changes were needed to improve the system.

Another pattern that emerged from the telephone interview process was that more emphasis and expertise was needed in the area of vocational rehabilitation. Respondents appeared to be stating that RSB services would be improved with additional activity in the job skill development and job seeking areas. It is this area of vocationally related services that respondents appeared to be making the most significant criticisms and strongest recommendations for improvement. More specifically, respondent's comments related to the need for increased counselor knowledge and awareness of accommodations needs as related to visual impairments and job performance.
Respondents also recommended that the process be streamlined, indicating that RSB services were, at times, slow and bureaucratic. Specific suggestions included a more timely eligibility and start-up process, more efficient communication with consumers (return phone calls in a timely manner) and the ability to re-enter the system when additional services are needed without a repeated full application process. As

mentioned above, two primary recommendations that emerged from the telephone interviews are: a) development of a more comprehensive orientation process for consumers upon first contact and beginning services with RSB and b) attention to agency expertise in the areas of job accommodation, vocational counseling and job placement.